State of Alaska FY2010 Governor's Operating Budget

Department of Health and Social Services Rural Services and Suicide Prevention Component Budget Summary

Component: Rural Services and Suicide Prevention

Contribution to Department's Mission

The mission of this component is to encourage and support regional and community-based efforts to address the problems of suicide, self-destructive behavior and substance abuse.

Core Services

- Programs funded through this component include the Community-Based Suicide Prevention Program (CBSPP),
 which provides small grants directly to communities; and the Rural Human Services System Project (RHSSP),
 which provides funds to regional agencies to hire, train and supervise village-based counselors. These
 counselors provide integrated substance abuse and mental health outpatient, aftercare and support services as
 well as prevention and education activities.
- Both the Community-Based Suicide Prevention Program and the Rural Human Services System Project focus on
 ensuring that needed services are both available in, and culturally appropriate to, the villages and towns of rural
 Alaska. CBSPP coordinators provide a wide range of prevention and intervention services. Rural human service
 trained village-based counselors provide a full range of paraprofessional services from screening to aftercare
 under the supervision of more advanced practitioners.
- The RHSSP training program is administered by the University of Alaska Fairbanks, College of Rural Alaska. The
 Rural Human Services (RHS) certificate is the first step in developing local talent that is eager to remain in their
 home community and to enter the social services fields. Upon completing their RHS certification, students are
 encouraged to continue their education with an AA degree in human services, a Bachelor's in social work and a
 Master's degree if desired.
- CBSPP also provide prevention and education programs in their communities.

FY2010 Resources Allocated to Achieve Results				
FY2010 Component Budget: \$2,921,600	Personnel: Full time	0		
	Part time	0		
	Total	0		

Key Component Challenges

- The Rural Human Services System Project aims to serve every region of the state by developing programming and a well-trained workforce to serve our rural and remote villages throughout Alaska. The goal is to provide culturally responsive services by developing counselors trained specifically to work in rural Alaska and to use traditional Alaska Native intervention and service approaches. This budget component includes two specific programs: 1) Rural Human Services Systems Project (RHSSP); and, 2) Community-based Suicide Prevention Project (CBSPP).
- The Rural Human Services Systems Project is a workforce development partnership with the UAFs' Rural Human Services (RHS) certification program. The RHS program is a 30 hour rural behavioral health training program that brings rural-based students into the UAF educational "pipeline", providing a 2-year cohort educational model that is specifically geared toward rural social service providers. Through grant funds provided by the Division of Behavioral Health, students working in rural Alaska are given the opportunity to enroll in the RHS certification program and work in the community, using their newly developed skills. Once they complete the RHS program they are encouraged to continue their education, by enrolling in the Human Services Associate Degree program, and then continue on into the intensive rural Bachelor of Social Work program. The ultimate goal of this program is a "counselor in every village;" a counselor trained in integrating

- traditional and western services techniques, and drawing on students who already live in our rural and remote communities, individuals who intend to remain in the community. The intent of this strategy is to overcome the challenge of keeping rural providers consistent, reducing turnover, and increasing the sensitivity to the needs and concerns of individuals and families living in rural and remote Alaska.
- One ongoing challenge is coordinating with the new Behavioral Health Aide program to eliminate duplication
 and enhance the efforts of each group. We are working closely with the UAF to identify ways to increase
 our partnership, better utilize these limited funds, and maximize and sustain the outcomes of the Rural Human
 Service training program.
- The CBSPP is a program developed to meet the needs of rural Alaska, where our state's suicide rates are often much higher than in urban areas of the state. These grant dollars help focus on the needs of small communities with limited resources, but with a great many challenges with alcohol and drug use, unemployment, mental health concerns, and a loss of cultural identify. We are working hard to enhance training for project coordinators and establish or broaden links among projects. The division's prevention staff is working with CBSPP grantees to develop better strategies, outcome measures and community planning and readiness to deal with issues related to suicide. We are also helping our smallest and most remote grantees develop broader community ownership of the behavioral health issues within their communities and address the issue of community readiness before trying to implement prevention and intervention programming. Too many communities, especially those hard hit by suicide, are not ready to address mental health issues and find healthy ways to intervene. We are working in close partnership with the Suicide Prevention Council on its statewide suicide prevention plan and media campaign to increase awareness and education about suicide and its impact on individuals, families and communities. We will continue to offer Suicide Prevention Gatekeeper training to all suicide prevention grantees in FY10.
- In an effort to broaden the scope of knowledge as to who the appropriate partners might be to work with us and grantees to improve suicide prevention outcomes, we will increase our focus on regional and community planning, and readiness to address the difficult issues surrounding suicide. In addition, we will explore better utilization of our state's telemedicine capabilities. Many of the Alaska Native Health Corporations are entering into telemedicine agreements that will provide increased early intervention, screening and treatment capacity in rural areas. We also plan to link with the Alaska Native Tribal Health Consortium and rural health clinics to improve service delivery, provide Gatekeeper training and analyze recommendations from the Alaska Follow-back Study to identify new strategies for earlier intervention with identified high-risk individuals.

Significant Changes in Results to be Delivered in FY2010

There will be no significant changes in results to be delivered.

Major Component Accomplishments in 2008

- During FY08, 18 communities received community suicide grant funds. Grant awards ranged in value from \$10,000 to \$30,000, with the average award approximately \$20,000.
- The division's prevention staff continued to provide one-on-one technical assistance with the community suicide prevention programs to develop ways to better identify and document the outcomes of their program activities.
- We held two additional suicide prevention Gatekeeper Training of Trainers (TOT) trainings in FY08, increasing our cadre of certified Gatekeeper Trainers. We now have a strong number of trainers across the state and across disciplines.
- The 30-credit RHS training program is offered at four rural campuses: Interior/Aleutian Campus at UAF;
 Kuskokwim Campus in Bethel; Northwest Community Campus in Nome; and Chukchi Campus in Kotzebue.
 The University of Alaska Anchorage focuses on students who work or plan to work providing services to individuals who have relocated to the City of Anchorage from rural communities.
- We are continuing our partnership with the UAF to increase the number of qualified rural providers able to provide direct behavioral health prevention, early intervention and crisis services.
- UAF implemented a 16-hour pre-certification for individuals who already have a BA but need the rural certification, or for individuals who are not yet ready to commit to the 30-hour program, but want to begin the process of getting RHS certification.
- In 2008, 37 students graduated from the RHS programs across the state. The RHS program is an exemplary
 model for addressing the ongoing behavioral health workforce dilemma—helping to "grow" our workforce in

their home communities.

Statutory and Regulatory Authority

AS 47.30.470-500 Mental Health 7 AAC 78 Grant Programs

Contact Information

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Rural Services and Suicide Prevention					
Component Financial Summary All dollars shown in thousa					
	FY2008 Actuals	FY2009	FY2010 Governor		
	Management Plan				
Non-Formula Program:					
Component Expenditures:					
71000 Personal Services	0.0	0.0	0.0		
72000 Travel	0.0	0.0	0.0		
73000 Services	188.0	290.0	398.6		
74000 Commodities	0.0	10.0	10.0		
75000 Capital Outlay	0.0	0.0	0.0		
77000 Grants, Benefits	1,949.8	2,101.1	2,513.0		
78000 Miscellaneous	0.0	0.0	0.0		
Expenditure Totals	2,137.8	2,401.1	2,921.6		
Funding Sources:					
1002 Federal Receipts	0.0	0.0	500.0		
1004 General Fund Receipts	142.2	285.9	285.9		
1037 General Fund / Mental Health	128.4	128.4	148.9		
1180 Alcohol & Other Drug Abuse	1,867.2	1,986.8	1,986.8		
Treatment & Prevention Fund					
Funding Totals	2,137.8	2,401.1	2,921.6		

Estimated Revenue Collections						
Description	Master Revenue Account	FY2008 Actuals	FY2009 Management Plan	FY2010 Governor		
Unrestricted Revenues None.		0.0	0.0	0.0		
Unrestricted Total		0.0	0.0	0.0		
Restricted Revenues Federal Receipts	51010	0.0	0.0	500.0		
Restricted Total		0.0	0.0	500.0		
Total Estimated Revenues	3	0.0	0.0	500.0		

1,986.8

2,921.6

Summary of Component Budget Changes From FY2009 Management Plan to FY2010 Governor All dollars shown in thousands **General Funds Federal Funds** Other Funds **Total Funds** FY2009 Management Plan 414.3 0.0 1,986.8 2,401.1 Adjustments which will continue current level of service: -Transfer Federal Authority from the 0.0 500.0 0.0 500.0 Behavioral Health Administration Component Proposed budget increases: -Increased Grantee Costs 20.5 20.5 0.0 0.0

434.8

500.0

FY2010 Governor